ADD'L FEE

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number 60/463,640 Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE (37 CFR 1.16(a)) \$385 OR TOTAL CLAIMS 9 (37 CFR 1.16(c)) minus 20 = 0 X \$ OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 X \$ OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR \$385.  $0_{OR}$ \* If the difference in column 1 is less than zero, enter "0" in column 2. **TOTAL** TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) (Column 1) SMALL ENTITY SMALL ENTITY CLAIMS HIGHES1 ⋖ REMAINING PRESENT RATE NUMBER ADDI-RATE ADDI-ENT **PREVIOUSLY EXTRA AFTER** TIONAL TIONAL AMENDMENT PAID FOR FFF FEE Total (37 CFR 1.16(c)) Minus ENDM X S X S OR Independent Minus X S OR X S = ξ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR = = TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST  $\mathbf{\omega}$ PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-AFTER **PREVIOUSLY EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE ũ Total (37 CFR 1.16(c)) Minus ENDM X S OR Minus OR ₹ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST O PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-ENT **PREVIOUSLY EXTRA** TIONAL TIONAL **AFTER** AMENDMENT PAID FOR FEE FEE Total Minus ENDMI (37 CFR 1.16(c)) OR X \$ Minus Independent (37 CFR 1.16(b)) OR X S FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

<sup>\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3"

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10826418

		CLAIMS AS	S FILED -	PART	i	CLAIMS AS FILED - PART I									
	<u> </u>		(Column 1)		(Colu	(Column 2)		TYPE		OR	OTHER THAN R SMALL ENTITY				
TOTAL CLAIMS			9			<u> </u>		TE	FEE	]	RATE	FEE			
FC	)R		NUMBER FILED		NUMBER EXTRA		BASI	C FEE	385.00	OR	BASIC FEE	770.00			
TOTAL CHARGEABLE CLAIMS			9 minus 20=		* O		XS	9=		OR	X\$18=				
INE	DEPENDENT CI	LAIMS	( mi	inus 3 =	*0	*0		3=		OR	X86=				
MULTIPLE DEPENDENT CLAIM PRESENT							+14	45=		OR	+290=	-			
* If the difference in column 1 is less than zero, enter					<sup>,</sup> "0" in c	olumn 2	TO		345	OR					
CLAIMS AS AMENDED - PART II									<u></u>	]	OTHER	THAN			
		(Column 1)		(Colun	mn 2)	(Column 3) SMALL			ENTITY	OR	SMALL E				
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total	*	Minus	##		=	X\$	9=		OR	X\$18=				
AME	Independent	*	Minus	***	: - 114	=	X4:	3=		OR	X86=				
L_	FIRST PHESE	NTATION OF ML	JLTIPLE DEP	ENDEN	CLAIM		+14	5=		OR	+290=				
								OTAL		\'	TOTAL ADDIT. FEE				
		(Column 1)		ADDIT.	ree .		, ,	ADDII. F LLE							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHI NUME PREVIO PAID F	EST BER DUSLY	(Column 3) PRESENT EXTRA	RA <sup>-</sup>	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total	*	Minus	##		=	X\$ :	9=		OR	X\$18=				
	Independent	*	Minus	***	3: 2124	-	X43	3=		OR	X86=				
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								5=		OR	+290=				
								OTAL EEE		OB L	TOTAL ADDIT. FEE				
		(Column 1)	ADDIT.	ree =			"LUUIIFELM								
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	(Colum HIGHE NUME PREVIO PAID F	EST BER OUSLY	(Column 3) PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total	*	Minus	**		=	X\$ 9	)=		OR	X\$18=				
	Independent	<u></u>	Minus	***		=	X43	=		OR	X86=				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						14			ľ	+290=				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+29U= TOTAL				
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.															